FÖRM PTO-1083

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit:

Examiner:

1752

Junghaw M. Im

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Mail Stop Amendment Commissioner for Patents

Date of Deposit

P.O. Box 1450

July 30, 2004

In reapplication of: Allyoshi AOYAGI

Serial No: 10/647,075 Filed: August 21, 2003

SEMICONDUCTOR DEVICE, METHOD FOR

MANUFACTURING SEMICONDUCTOR DEVICE AND

ELECTRONIC EQUIPMENT

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

Small entity status has been claimed. See 37 CFR § 1.27.

A Notice Of Change Of Attorney's Address and Associate Power Of Attorney is enclosed.

No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR		(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE	
TOTAL CLAIMS FEE	8	-20	22	**	0	LG=\$18 SM=\$9 \$18	\$	0
INDEPENDENT CLAIMS FEE	1	-3	3	***	0	LG=\$86 SM=\$43	\$	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS LARGE ENTITY FEE = \$290 SMALL ENTITY FEE = \$145							\$	0
	•					TOTAL	\$	0

If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or the "High Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

A check in the amount of \$_-0-_ to cover the additional claims fee is enclosed. A copy of this sheet is enclosed.

A check in the amount of \$_-0- to cover the extension fee is enclosed. A copy of this sheet is enclosed.

The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. A copy of this sheet is enclosed.

Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims

Any patent application processing fees under 37 C.F.R. § 1.17

Date: July 30, 2004

Biltmore Tower 500 South Grand Avenue, Suite 1900 Los Angeles, California 90071

Telephone: 213 337-6700 Facsimile: 213 337-6701

Respectfull **y** ubmitted HOGAN &

By: Anthony J. O

Registration No. 41,232 Attorney for Applicant(s)



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Akiyoshi AOYAGI

Serial No: 10/647,075

Confirmation No. 9703

Filed: August 21, 2003

SEMICONDUCTOR DEVICE, METHOD FOR

MANUFACTURING SEMICONDUCTOR DEVICE AND ELECTRONIC EQUIPMENT

RESPONSE TO RESTRICTION REQUIREMENT

Mail Stop Non-Fee Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In response to the Restriction Requirement dated July 14, 2004, Applicant elects for prosecution the claims of Group I, claims 1-8 without traverse.

If there are any fees due in connection with the filing of this response, please charge the fees to our Deposit Account No. 50-1314.

Respectfully submitted,

HOGAN

By:

Anthony L. Orler

Registration No. 41,232 Attorney for Applicant(s)

500 South Grand Avenue, Suite 1900 Los Angeles, California 90071

Phone: 213-337-6700 Fax: 213-337-6701

Date: July 30, 2004

Art Unit: 2811

Examiner: Junghaw M. Im

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Mail Stop Amendment Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450, on

July 30, 2004

Date